

# 2014 National Patient Safety Goals

## Goal 1: Improve the accuracy of patient identification

**NPSG 01.01.01** Use the patient's **full name and date of birth** when administering medications, blood, or blood components and when collecting blood samples or other specimens (Label all containers in the presence of the patient).

**NPSG 01.03.01** Eliminate transfusion errors related to misidentification by using two verifiers at the bedside prior to administration. Only physicians, RNs, or oral surgeons may start a transfusion.



## Goal 3: Improve the safety of using medications

**NPSG 03.04.01** Label all medications, medication containers (syringes, medicine cups, basins) or other solutions on and off the sterile field in perioperative and other procedural settings

**NPSG 03.05.01** Reduce the likelihood of patient harm associated with anticoagulation therapy by using approved protocols and individualized care.

**NPSG 03.06.01** Maintain and communicate accurate patient medication information. Obtain a complete list of the patient's current medications (prescription medications, vitamins, supplements, OTC, and herbals) when the patient is seen and compare that list to any medication ordered. Provide a complete medication list to the patient when they leave. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.



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## Goal 2: Improve the effectiveness of communication among caregivers

**NPSG 02.03.01** All critical results are reported to a responsible provider within **one hour** of being verified as critical. This includes Lab and Radiology procedures.



## Goal 6: Improve the safety of clinical alarms

**NPSG 06.01.01** Inventory alarms used in the patient care setting, define critical settings based on patient's assessment, and identify which alarms are most important to manage.



## Goal 7: Reduce the risk of health care-associated infections

**NPSG 07.01.01** Comply with current CDC hand hygiene guidelines by always cleaning hands before and after patient care, either with alcohol-based hand sanitizers or with soap and water.

**NPSG 07.03.01** Implement evidence-based practices to prevent health care-associated infections due to MDROs (ex. MRSA)

**NPSG 07.04.01** Implement best practices to prevent central line-associated infections. C-line bundles are used per CDC guidelines.

**NPSG 07.05.01** Implement best practices for prevention of surgical site infections. Appropriate skin antisepsis with Chloraprep, clippers for hair removal, normothermia and appropriate timing for antibiotic administration.

**NPSG 07.06.01** Implement evidence-based practices to prevent indwelling catheter-associated urinary tract infections (CAUTI).



## Goal 15:

The organization identifies safety risks inherent in its patient population

**NPSG 15.01.01** Identify patients at risk for suicide and refer immediately if necessary.



## Universal Protocol:

**UP 01.01.01** Verify the correct procedure, for the correct patient, at the correct site.

**UP 01.02.01** Before procedure, mark the correct place on the patient's body where the surgery is to be done.

**UP 01.03.01** Perform a **TIME OUT** before procedure! Verify correct patient, correct site, and the procedure to be done. Document! Document! Document! This includes Non-OR settings.



Report! Report! Report!  
using **Patient Safety Reporting (PSR)**

Patient Safety Questions?  
Contact  
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